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CONFIRMATION NO. 4128

<b>SERIAL NUMBER</b> 10/716,195	<b>FILING OR 371(c) DATE</b> 11/18/2003 <b>RULE</b>	<b>CLASS</b> 204	<b>GROUP ART UNIT</b> 1742	<b>ATTORNEY DOCKET NO.</b> FOC1130
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/038,745 01/02/2002 ABN and is a CIP of 10/193,864 07/12/2002 ABN and is a CIP of 10/283,433 10/30/2002 which claims benefit of 60/333,405 11/26/2001 and said 10/038,745 01/02/2002 claims benefit of 60/333,405 11/26/2001 and said 10/193,864 07/12/2002 claims benefit of 60/333,405 11/26/2001

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 02/13/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

44654

## TITLE

Modular molecular halogen gas generation system

<b>FILING FEE RECEIVED</b> 502	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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